9. Reducing the period for filing complaints in the Court from 30 to 15 days.

Before finalizing the Amendment Bill, the amendments to the said Act were considered by the Technical Sub-Committee of the Central Supervisory Board constituted under the said Act in its meetings held on 26.5.2001, 9.6.2001 and 14.8.2001, keeping in view the emerging technologies which enable sex selection even before conception, difficulties experienced in the implementation of the Act, the representations received from professional organizations such as the Indian Medical Association, Human Rights Law Network, social activists and various other stakeholders.

Upgradation of Health Centres in Rajasthan

*308. SHRI SANTOSH BAGRODIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether primary and secondary medical centres in Rajasthan are equipped and able to tackle the threat of plague or other epidemics in future;

(b) if so, the details thereof; and

(c) if not, whether Government would consider upgrading these health centres enabling them to fight any epidemic in the initial stages?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI SHATRUGHAN SINHA): (a) to (c) No case of plague has been reported from the State of Rajasthan. For other diseases, like Cholera, Typhoid and Hepatitis etc., the Medical Colleges in the State are fully equipped for diagnosis. C.D. Alert published by National Institute of Communicable Diseases, Delhi is also circulated to all the States for their guidance.

Further, seven districts of Rajasthan, *i.e.* (1) Alwar, (2) Jodhpur, (3) Udaipur, (4) Ajmer, (5) Kota, (6) Sikar and (7) Sirohi have been covered under the National Surveillance Programme for Communicable Diseases (NSPCD) whose object is to generate early warning signals regarding outbreak of epidemic prone diseases and response through capacity building, laboratory strengthening etc.

ICMR's Desert Medicine Research Centre, Jodhpur has also taken steps to develop health management information system using information technology in co-ordination with Department of Health, State Government of Rajasthan. This facility once developed will enable to predict epidemic situation.

Integration of ISM in the syllabus of MBBS

*309 SHRI R.S. GAVAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) wther Government propose to change the syllabus of MBBS course to integrate Indian Systems of Medicine into it;

(b) if so, the details thereof; and

(c) if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI SHATRUGHAN SINHA): (a) to (c) The Central Government on the recommendation of the Department of Indian Systems of Medicine and Homoeopathy have asked the Medical Council of India to consider the inclusion of basic principles and concept of Ayurveda, Homoeopathy, Siddha and Yoga in the course contents of MBBS course. This proposal is intended to sensitize the students of MBBS course about the philosophy and underlying principles of these systems of medicine. The Medical Council of India has appointed a Sub-Committee to study this proposal. The report of the Sub-Committee has been circulated among the Deans/ Principals of Medical colleges and Directors of Medical Education of all the States inviting their comments in the matter. The comments of some of the Deans/Principals and Directors of Medical Education of the States are yet to be received. The Central Government will take appropriate decision in the matter on receipt of the final recommendations of the Medical Council of India.

Disposal of cases in Fast Track Courts in A.P.

*310. SHRI GHULAM NABI AZAD: Will the Minister of LAW AND JUSTICE be pleased to state:

(a) whether the Chief Justice of the Andhra Pradesh High Court has expressed his satisfaction over the case disposal rate achieved by the Fast Track Courts in the State;